

244112

STATE OF SOUTH CAROLINA

(Caption of Case)

Example: Application for a Class C Charter Certificate from
John Doe dba Doe's Limo

Request to Amend the name on a Class C Charter Certificate

Current Name: Maya Group, LLC DBA Charleston Downtown Limo/Charleston Black Cab Co.

**BEFORE THE
PUBLIC SERVICE COMMISSION
OF SOUTH CAROLINA**

TRANSPORTATION COVER SHEET

**DOCKET
NUMBER: 2007 - 380 - T**

If this is your first time filing an application with the PSC, you will not have a Docket Number. The Commission will assign one to you. If you have filed with the Commission before, a Docket Number was assigned and should be entered above.

(Please type or print)

Submitted by: * Sam Mustafa

Telephone: * 843-723-1111

Address: * 209 Meeting Street, Charleston SC 29401

Fax: * 888-213-8110

Other: * 843-412-9150

Email: * christina@charlestonhospitalitygroup.com

NOTE: The cover sheet and information contained herein neither replaces nor supplements the filing and service of pleadings or other papers as required by law. This form is required for use by the Public Service Commission of South Carolina for the purpose of docketing and must be filled out completely.

NATURE OF ACTION (Check all that apply)

- ☐ Application - Class A/A Restricted
- ☐ Application - Class C Taxi
- ☐ Application - Class C Charter
- ☐ Application - Class C Charter Bus
- ☐ Application - Class C Non-Emergency
- ☐ Application - Class C Stretcher Van
- ☐ Application - Class E Household Goods
- ☐ Application - Class E Hazardous Waste
- ☐ Application
- ☐ Request for Extension to Comply with Order
- ☐ Request for Order Granting Authority to Obtain a Certificate of Public Convenience and Necessity to be Rescinded
- ☐ Request for Cancellation of Certificate
- ☐ Request for Suspension
- ☐ Request for Reinstatement

- ☒ Request for Name Change on Certificate
- ☐ Request to Amend Scope of Authority
- ☐ Request to Amend Tariff (rate increase, etc.)
- ☐ Request to Amend Passenger Limit
- ☐ Request
- ☐ Exhibit
- ☐ Late-Filed Exhibit
- ☐ Letter
- ☐ Proposed Order
- ☐ Publisher's Affidavit
- ☐ Reservation Letter
- ☐ Response
- ☐ Return to Petition
- ☐ Other: _____

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MAY 24 2013
PSC SC
MAIL ROOMS

If you have any questions about this form, please contact the PUBLIC SERVICE COMMISSION at 803-896-5100.

CLASS C AMENDMENT FORM

Mail or fax a copy to:

File the original with:

Public Service Commission of South Carolina
 Clark's Office
 Motor Carrier Matters
 P.O. Box 11649
 Columbia, S.C. 29211
 (803) 896-5100
 FAX (803) 896-5199

S.C. Office of Regulatory Staff
 Transportation Department
 1401 Main Street, Suite 900
 Columbia, S.C. 29201
 (803) 737-0578
 FAX (803) 737-0815

DATE: FEBRUARY 12, 2013

I have the following Certificate:

☒ Class C Taxi # 8233 ☒ Class C Charter # 7891-C ☐ Class C Charter Bus # _____
☐ Class C Non-Emergency # _____

Please consider this as my request for the following amendment(s) to my Certificate:

☒ Name Change

From: Maya Group, LLC DBA: Charleston Downtown Limo/Charleston Black Cab Co.
 (Current Name) (Current DBA if applicable)
 TO: Maya Group, LLC DBA: Charleston Downtown Limo
 (New Name) (New DBA if applicable)

☐ Scope of Authority

From: Not applicable To: _____
 (Current Scope) (New Scope)

☐ Passenger Limit

From: Not applicable To: _____
 (Current Limit Number) (New Limit Number)

Maya Group, LLC dba Charleston Downtown Limo/Charleston Black Cab Co. 209 Meeting Street
 Name & DBA if DBA is applicable (Street and/or Mailing Address)

Charleston, SC 29401
 (City, State, Zip Code)

(Signature)

843-723-1111
 (Telephone Number)

Owner
 (Title) Owner, President, etc.